

MOORE COUNTY SHERIFF'S OFFICE ANIMAL SERVICES DIVISION

Animal Adoption Application

Name:	:			Date:			
Physica	l Address:						
Mailing	; Address (if dif	ferent):					
Telepho	one Numbers:	Home:	Wor	k:	Cell:		
Email A	ddress:						
Current	t Employer:						
approv	•				ving questions. If you d will become a part o	• •	
1.)	Are you at lea	st 18 years of	age?				
2.)	Have you or a	nyone in your	household ever b	oeen investiga	ted for animal cruelty	or neglect?	
3.)	Have you eve	r adopted an a	— nnimal from the N	Moore County	Shelter before?		
4.)	My home is a	: [House] [A	•		ouse] [Mobile Home]	[Farm]	
_,	a. It	[0.000]		have a fen	•	_	
5.)	a. If yes,		be all restrictions		ditions regarding pets not limited to species		
6.)	_		your household:				
	Pet Name	Breed	Age	Sex	Spay/Neutered	Up to date on Vaccines	
7.)	What is the na	ame and addr	ess of your currer	nt, or most rec	ent, veterinarian?		
8.)	Will this pet be kept primarily:		ily: [Indoors]	[Outdoors	.] [Both]	[Both]	
			, ,	•	dequate outdoor shelt		
	•		·		nty Animal Ordinance Iinances is available up		
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9.) What actions will be made for the pet if you move away from your current home?

	What steps will you take to correct any behavioral issues that may arise, such as aggression separation anxiety?	n or
-	If you have current pets, we strongly recommend that you take advantage of our "Meet & Greet" program with your new pet. Has our "Meet & Greet" program been explained to y	
-	a. Have you brought in your existing pet(s) for a "Meet & Greet"?	
	b. Have the possible negative consequences of not doing a "Meet & Greet" been exp	olained
	to you by a member of the Animal Services Staff?	
	nitial each of the following to acknowledge that a representative of Animal Services has ed each item to you to your satisfaction and understanding.	
1.	The actions of any animal are often unpredictable and they may BITE or SCRATCH.	
2.	Animals must be closely SUPERVISED when they are with CHILDREN.	
3.	An animals' behavior may change after it leaves the Shelter and acclimates itself to a different environment.	
4.	The animal may be a greater than normal FLIGHT RISK until it acclimates to a new home.	
5.	I have been advised whether or not the animal has displayed aggression towards other dogs or cats.	
6.	I have been advised whether or not the animal has known medical conditions that will require treatment by a veterinarian such as heartworms, allergies, or other known conditions.	
7.	If the animal is a cat and has been declawed, the cat will need to be kept EXCLUSIVELY indoors.	
8.	State and County law requires that ALL animals four (4) months or older must be vaccinated against rabies and must have tags displayed on the collar.	
best of n	ng my name below, I certify that all information provided above is true and complete to my knowledge. I understand that my responses are subject to verification by the Moore Sheriff's Office Animal Services Division and that my Adoption Application may be denie discretion of the Moore County Sheriff's Office Animal Services Division.	
Signatur	re: Date:	
Applican	nt Interviewed by: Date:	